

DOCUMENT RESUME

ED 415 971

PS 026 152

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TITLE Strategies To Build and Sustain Good Child Care Quality during Welfare Reform. Issue Brief #1.
INSTITUTION Child Care Action Campaign, New York, NY.
PUB DATE 1996-00-00
NOTE 9p.
AVAILABLE FROM Child Care Action Campaign, 330 Seventh Avenue, 17th Floor, New York, NY 10001; phone: 212-239-0138; fax: 212-268-6515 (\$3 prepaid).
PUB TYPE Reports - Descriptive (141)
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Day Care; Early Childhood Education; Policy Formation; Program Descriptions; Program Development; *Public Policy
IDENTIFIERS Arizona; Arkansas; Child Care Action Campaign; Day Care Quality; Pennsylvania; State Policy; State Role; *Welfare Reform

ABSTRACT

This report from the 1995 Child Care Action Campaign national audioconference examines approaches to building support among child care providers, legislators, and parents for investments in good quality child care in light of welfare reform. The report summarizes recent findings that children in good quality child care had a more developed understanding of language, scored higher on pre-math skills, had more positive self concepts, and liked their child care centers better than children in mediocre or poor quality settings. The efforts of the Arkansas Early Childhood Commission to build a system of good quality care for young children are described, including strategies to create a system of voluntary on-site assessment of day care centers and homes, to reward good quality programs through facility and equipment grants and tax credits to parents who use them, and to raise the visibility of good quality programs. Arizona's strategies of underpromising and overdelivering on child care quality are discussed, including distributing funding to the entire range of child care program types, funding a variety of pilot demonstrations of quality improvements, and using the state budget process to heighten legislators' understanding of and support for continuity of care for children. The activities of the staff training program to improve staff-to-child ratios in Pennsylvania are also described, including linking training to compensation, cooperating with public and private organizations to focus training and share resources to contain costs, and tying increases in quality to regulations by increasing the number of children per staff for teachers having more training and experience. (KB)

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**ISSUE
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Strategies to Build and Sustain Good Child Care Quality during Welfare Reform

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Introduction

Impending federal welfare legislation creates a dilemma for states. Child care needs will burgeon as millions of former AFDC recipients go off the rolls and into job training and jobs, but it is unlikely that child care subsidies will expand in the same proportion. States will have to decide how best to stretch scarce resources to meet increased child care demand while also protecting children by investing to maintain or improve program quality.

Can both goals be met? Or, will child care administrators have to trade off the numbers of families served against the quality of child care purchased? Will they slow expansion (thereby depriving some families of support for work) in order to ensure that children receive the care and stimulation that leads to healthy child development and later school success? Or will they give priority to expanding supply even if they cannot assure its quality? Where and how will states reconcile these potentially conflicting claims on resources?

To explore this dilemma and identify three partial approaches to resolving it, the Child Care Action Campaign conducted a national audioconference on June 26, 1995. Intense interest in the topic was apparent in the participation of 48 states and 100 conference sites.

The audioconference featured presentations by state officials from Arizona, Arkansas, and Pennsylvania. Each presenter offered an approach to building support and momentum among child care providers, legislators, and parents for investments in good quality child care. Each drew examples from activities financed wholly or in part by "quality set-aside" funding provided by the Child Care and Development Block Grant (CCDBG), which was implemented in 1991.

In Arkansas, good quality care is publicly "marketed" by offering tax incentives to parents who use, grants to providers who offer, and visibility to legislators who support good quality child care.

In Arizona, good quality child care is "underpromised but overdelivered" by state administrators who carefully gather data on the benefits of past investments in good quality for use in educating legislators to its importance.

In Pennsylvania, 50,000 training opportunities per year are the foundation for a new experiment: permitting teachers with more training to care for a slightly higher number of children, thus meeting the goals of supply expansion and quality enhancement at no additional cost to providers or parents.

None of these approaches is fully tested. None offers more than partial guidance to child care administrators who face a radically altered environment of child care funding and programs. When states receive federal block grants in welfare and child care under new legislation, they will be free, in large measure, to reopen every question of child care policy from eligibility to reimbursement rates to regulation. Nonetheless, the examples aired through the audioconference demonstrate that every dollar spent on quality can be spent "strategically" in ways that both serve individual children and families and also put in place a framework for expanding supply and improving quality simultaneously. Difficult choices are not only short-term challenges; they can also be opportunities to shape a long-term positive evolution.

Participants in the CCAC Audioconference

Presenters

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Arkansas Early Childhood Commission

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Frank Porter Graham
Child Development Center
University of North Carolina
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President-elect
National Association for the Education
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Richard Fiene, Ph.D.

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Issue Brief

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Recent Findings about Child Care Quality and Why It Is Important

To open the audioconference, Barbara Reisman introduced the issue of child care quality in the context of welfare reform. She explained that investments in good quality care are investments in child development and that welfare reform cannot succeed if it doesn't protect children's well-being as well as support parents' transition to jobs.

To underscore what is at stake in child care quality, Dr. Richard Clifford discussed findings from the recent study, *Cost, Quality and Child Outcomes in Child Care Centers*¹ in which he was a principal investigator. In their extended observations of the quality of care in 401 nonprofit and for-profit centers in four states, Dr. Clifford and his colleagues have compiled a disturbing picture of the quality of child care in America. They observed that:

- Overall, 84 percent of all children in the centers received care that was mediocre or poor.

- Forty percent of infant and toddler rooms (those with children under 2½ years of age) studied were rated "poor" quality. The youngest children were found by the Cost, Quality and Child Outcomes Study to be at greatest risk of receiving poor quality care.

Dr. Clifford and the other members of the study team observed a lack of basic sanitary conditions and problematic health and safety practices that obviously endangered children. In poor quality infant care settings, they observed that caregivers did not wash their hands after diapering each child or take other precautions to minimize the spread of illness. In settings rated as poor, children were rarely cuddled or held, spoken to or played with.

One of the study's most important findings was that:

- Children in good quality child care had a more developed understanding of language, scored higher on pre-math skills, had more positive attitudes about themselves, and said they liked their child care centers better than children in mediocre or poor quality settings. This was especially true for children in some minority groups and children whose mothers had low levels of education themselves.

In good quality settings, the investigators observed children being held and spoken to, and encouraged to talk throughout the day. They found adequate furnishings, equipment and materials for play, learning, eating, sleeping and toileting.

"For the foreseeable future," says Dick Clifford, we will "have a large number of children in some kind of non-parental arrangements before they come into school, and...we need to be sure that those arrangements are of quality that will benefit children."

How Arkansas "Markets" Quality to Parents and Legislators

The Arkansas Early Childhood Commission, directed by Glenda Bean, administers 25 percent of Arkansas' CCDBG funds and the state-funded early childhood preschool program, and coordinates the efforts of the Departments of Human Services and Education to build a system of good quality care for young children in Arkansas. One of the commission's major initiatives is to reward local programs with additional funding if they can demonstrate that they deliver care of good quality.

**The Arkansas Early Childhood Commission's
Strategy for Promoting Good Quality Child Care**

- Create a system of voluntary on-site assessments of child care centers and homes across the state, employing trained observers to conduct the assessments.
- Reward programs that are assessed as having good quality by
 - extending facility and equipment grants to them; and
 - giving tax credits to parents who use them.
- Raise the visibility of good quality programs to the general public and legislators as evidence that tax dollars are getting results.

Arkansas' approach to promoting quality in child care occurs in an environment of significant state support for child care. Former Governor Bill Clinton, a strong supporter of good quality child care, formed the Arkansas Early Childhood Commission in 1989 to plan programs and spending under the impending CCDBG legislation. In 1993, the Arkansas legislature created the Child Care Approval System that offers child care providers voluntary on-site evaluations of program quality and offers incentives for quality enhancement.

To assess a program's quality, the commission carries out full-day site visits to centers and family child care homes, using state employees who are specially trained as observers. Programs assessed as providing good quality receive facility and equipment enhancement grants. Programs that fall short or that seek help to prepare for an assessment may receive the services of consultants hired by the commission to provide technical assistance. Since the assessments were first implemented in January 1994, the commission has evaluated 384 settings, including programs for infants and toddlers, three- to five-year-olds, and school-age children using scales adapted from Clifford and Harms' Infant/Toddler Environment Rating Scale, the Family Day Care Rating Scale, and the Early Childhood Environment Rating Scale. The commission has awarded nearly \$500,000 in enhancement grants to these centers and family day care homes.

Arkansas legislation offers a strong incentive to parents to choose good quality programs. It doubles the state dependent care tax credit for parents who enroll their children in a program that has received a good quality rating.

The commission also actively promotes quality-enhancement investments to the general public and to legislators. The commission informs local communities and the media about programs that attain good quality status or receive enhancement grants. It also ensures that elected officials know about good quality programs and the impact of enhancement grants and technical assistance in their jurisdictions. Members of the commission invite legislators to visit programs to show them what good quality child care looks like and what specific improvements the state buys with its child care dollars.

Through information campaigns, the commission has made good quality child care highly visible. Because its very public spending has helped bring about a general consensus on the need for good quality care, the commission is in an

excellent position to negotiate the direction of government spending on quality in the months ahead.

Thanks to the commission's "marketing" approach, there is "not a lot of dissension about the fact that [children] need to have quality services" in Arkansas, according to Glenda Bean. However, Ms. Bean anticipates "some discussion about what [good quality] means and what funds need to be in place to support it" when new federal legislation gives states increasing flexibility in determining how to spend child care dollars. She views the block grants as "an opportunity and a challenge" to promote a "more seamless system for young children, to really maximize what [the commission] is doing at the state level." The Early Childhood Commission and the Governor's Partnership Council, which was formed this year to coordinate the functions of the Health, Human Services, and Education Departments, will continue to focus on quality "for no other reason than taxpayers want to know that their dollars are being spent well and effectively."

Under-promising and Over- delivering in Arizona

Arizona's governor and legislature have played a limited role in promoting good quality child care. Nonetheless, the state's recent history suggests that administrators who carefully gather evidence about the costs and benefits of good quality care can propel significant gains in quality and then win broader public and legislative support for extending these gains.

In 1989, in anticipation of the passage of the CCDBG, Arizona convened representatives from different segments of the child care field to plan the allocation of the first year of funding. Based on input from this group, state administrators decided to spread the CCDBG quality set-aside funds among many programs, using a pilot-test strategy to demonstrate how quality gains are possible in all types of child care and early education settings. This pilot-test strategy helped to build a broad base of support for investments in quality across many segments of the child care provider community. The recipients of CCDBG funding included new initiatives such as a state-wide child care resource and referral system, child care programs for homeless children, and child care programs for children affected by domestic violence. Significant investments were also directed to training providers in for-profit, nonprofit, and public child care cen-

Arizona's Strategy of Underpromising and Overdelivering on Child Care Quality

- Distribute available quality funding across the entire range of child care program types to build a broad constituency.
- Fund a variety of pilot demonstrations of improvements in quality in order to gather and publicize data about the effects of spending on quality child care.
- Use the state budget process to heighten legislators' understanding of and support for continuity of care for children, which is a central component of quality.

ters, group homes and other family child care settings; and for enhancing the quality of existing programs by upgrading facilities, curriculum, equipment, and materials.

Since 1991, Bruce Liggett and other state administrators have established pilot programs to demonstrate the structure and cost of Arizona's many effective approaches to meeting different child care needs: special needs child care, Head Start, and programs linking resource and referral with child care eligibility services. Now, state child care administrators have assembled evidence of success that they hope will persuade legislators and other state decision makers to maintain funding for good quality child care.

Moving into the block grant era, child care administrators in Arizona seek to use the state budget in very specific ways to make the case for quality. Their strategy is "to provide a lot more detail in the budget process about how many children [are assisted with child care funds], how often they change eligibility," and how families move in and out of the state child care system. Through the budget, administrators and advocates plan to "paint a picture" for decision-makers, showing them that the three- to five-year-olds served by Arizona's public subsidy programs "are getting on average 14 or 15 days or half-days of care per month." They expect that this information will prompt decisionmakers to ask, "What's happening to the children the other days?" In their responses, administrators will be able to tell legislators that children need stable and consistent relationships with caregivers in order to feel safe and secure and parents need stable, consistent child care they can depend on so they can go to work and work productively.

More generally, Mr. Liggett thinks his best chance to build support for quality in the state's budget is to show that continuity and stability of program funding promotes good quality care for children and accountability by providers. Continuity of care in Arizona can be enhanced through the budget process by coordinating funding streams to make it easier for children to remain in the same child care setting even when their families' shifts in eligibility cause shifts in child care funding streams. Administrators will be able to use existing data both to show how often children change care arrangements and to demonstrate that child care providers are making effective use of scarce resources by keeping their subsidized spaces fully utilized over time.

Staff Training Linked to Higher Staff:Child Ratios in Pennsylvania

Many researchers have found a clear link between trained and qualified staff and good quality child care. The level of preschool teachers' formal education and their specialized training positively affect children's development.

A number of programs, including North Carolina's TEACH project and California's Early Childhood Mentor Teacher Program, provide incentives to increase training for child care providers. According to Richard Fiene, Pennsylvania has one of the largest programs and provides 50,000 training opportunities for providers every year.

For the past three and a half years, the Pennsylvania Bureau of Child Care has used training extensively to improve child care quality. The training system was developed by state administrators who distributed CCDBG quality funds in response to the requests of provider and advocacy groups for a comprehensive

Pennsylvania Administrators' Strategy to Increase Quality and Supply without Increasing Parent Fees

- Implement a professional development system and link training to compensation.
- Cooperate with public and private organizations to focus training and share resources in order to contain costs.
- Tie increases in quality to regulations, without necessarily increasing program cost or parent fees, by increasing the number of children per staff for teachers having more training and experience.

training system that was sensitive to local needs.

In each county on-site training is provided at the Pennsylvania State University Cooperative Extension and satellite and video training sessions will soon reach providers in child care centers and family child care homes across the state. The Bureau has also cooperated with private organizations such as the American Red Cross to hold joint training sessions that address topics of local concern such as immunization.

More recently, building on the state's staff:child ratio requirements that already conform with accreditation standards set by NAEYC and shown to promote good outcomes for children, Richard Fiene has developed a strategy that could potentially increase the supply of child care and raise staff compensation while maintaining program quality without significantly increasing program cost or parent fees. In this model, a small change in the child:staff ratio would be permitted for staff having higher levels of education, experience, and training. For example, a highly skilled provider in a preschool room could work with 11, instead of the state's legal limit of 10, three- and four-year-olds. A program with these higher ratios would bring more revenue into the program to pay for training and compensating highly qualified staff, at no additional cost to parents.

A strategy that slightly increases the number of children per staff person, as staff receive more training, would work better for older children than for infants and toddlers who have constant physical needs and where the addition of one child translates into a big proportional change in the child:staff ratio. One adult—however highly trained—should not be responsible for more than four infants or more than six two-year-olds, according to NAEYC and to other experts in child health and development.

Dr. Fiene's novel approach would best be implemented in programs where quality could be closely monitored and quality improvements assessed. In addition, this strategy would require a change in current state regulations involving ratios. Dr. Fiene is proposing to pilot test this approach in a number of centers. He says this is not state policy yet, but when pilots demonstrate that this strategy works, it will offer a cost effective way to combine the goals of enhancing child care quality and increasing child care supply in coming years.

About the Child Care Action Campaign

Child Care Action Campaign (CCAC) is a national nonprofit coalition of individuals and organizations whose goal is to improve the lives of children and their families by expanding the supply of good quality, affordable child care. Founded in 1983, headquartered in New York, and assisted by a panel of advisors in every state, CCAC uses its information resources and strategic skills to engage parents, policymakers, business leaders, and child care providers in improving child care and early education. Through its national conferences, business roundtables, and state forums, CCAC is a catalyst for change. CCAC has led national thinking in defining child care as a bottom line economic issue and as a fundamental component of both welfare reform and education reform.

About CCAC's Family Support Watch (FSW)

As part of its mission to increase the availability of good quality, affordable child care programs, CCAC established the Family Support Watch (FSW), a project to monitor the implementation of the 1988 Family Support Act and to ensure that eligible families have access to the child care guaranteed by the Act. Since 1989, FSW has engaged in a wide range of policy analysis and advocacy activities including issuing reports, testifying at public and Congressional hearings, communicating to the public in print and broadcast media, distributing outreach materials to parents, and convening state administrators, advocates, and leaders through national audioconferences. In short, CCAC has tried, wherever possible, to get out the message that a child care guarantee is a crucial component of any welfare-to-work strategy and to work with state leaders to ensure that that guarantee is delivered to families.

Acknowledgements

Child Care Action Campaign gratefully acknowledges support for the audioconference series and the development of issue briefs from the Foundation for Child Development, and support for the distribution of the issue briefs from the James C. Penney Foundation.

In addition, Child Care Action Campaign thanks Sarah Monroe, our audioconference intern, and our presenters, who have generously agreed to provide further information:

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